## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

106 19484

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS							Γ	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	В	ASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			<b>√</b> min	us 20=	* (8		,	X\$ 9=		OR	X\$18=	,
INDEPENDENT CLAIMS			minus 3 =  *			£		X42=		OR	X84=	84
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, en					"0" in c	olumn 2	L	TOTAL		OR	TOTAL	934
CLAIMS AS AMENDED - PART II								OTHER THAN				
		(Column 1)	Institution (Control of Control	(Colur HIGH		(Column 3)		SMALL E		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- 01 111	=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	ENDEN	CLAIM			+140=		OR	+280=	
							 ^^	TOTAL		اما	TOTAL ADDIT. FEE	
		AU	DIT. FEE			AUUII. FEE						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	CL AINA			X42=		OR	X84=	
	PIRST PRESE	NTATION OF MI	JETIPLE DEP	ENDEN	CLAIM			+140=		OR	+280=	
							. L AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	<del> </del>	=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	F 01 4 11 -	= =		X42=		OR	X84=	
Ļ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	'ENDEN	CLAIM		<b> </b>	+140=		OR	+280=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									∩B	TOTAL ADDIT. FEE	
***	If the "Highest Nu	mber Previously P iber Previously Pa	aid For" IN THI	S SPACE	is less tha	an 3, enter "3."	AD		ropriate box	İ		